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EXPRESS MAIL CERTIFICATE

Date 8/8/00 Label No. 628221887

I hereby certify that, on the date indicated above I deposited this paper or fee with the U.S. Postal Service & that it was addressed for delivery to the Assistant Commissioner for Patents, Washington, DC 20231 by "Express Mail Post Office to Addressee" service.

Name (Print) D B Peck

Signature L B Peck

PLEASE CHARGE ANY DEFICIENCY UP TO \$300.00 OR
CREDIT ANY EXCESS IN THE FEES DUE WITH THIS
DOCUMENT TO OUR DEPOSIT ACCOUNT NO. 04-0100

DARBY & DARBY P.C.

805 Third Avenue
New York, New York 10022
212-527-7700

Docket No: 3092/1G844-US1

Box PATENT APPLICATION

Assistant Commissioner for Patents
Washington, DC 20231

Sir:

Enclosed please find an application for United States patent as identified below:

Inventor/s (name ALL inventors): Evan Kaimowitz

Title: VOICE CLIP IDENTIFICATION METHOD

including the items indicated:

1. Specification and 19 claims: 3 indep.; 16 dep.; _ multiple dep.
2. ☒ Executed declaration and power of attorney
☐ Unexecuted declaration and power of attorney
3. ☒ Formal drawings, 9 sheets (Figs. 1, 2, 3A-3B, 4, 5A, 5B, 6A, 6B)
☐ Informal drawings, _ sheets (Figs.)
4. ☐ Assignment for recording to:
5. ☒ Verified Statement Claiming Small Entity Status



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6. ☒ Check in amount of \$345.00, (\$345 filing; \$0 recording)
(See attached **Fee Computation Sheet**)
7. ☐ Preliminary Amendment
8. ☐ Information Disclosure Statement
9. ☐ Please amend the description by inserting the following paragraph after the line containing the title on page 1:
"This patent application claims the priority of U.S. provisional patent application No. _____, which is incorporated herein by reference."

Priority is claimed for this application, corresponding application/s having been filed as follows:

Country:

Number:

Date:

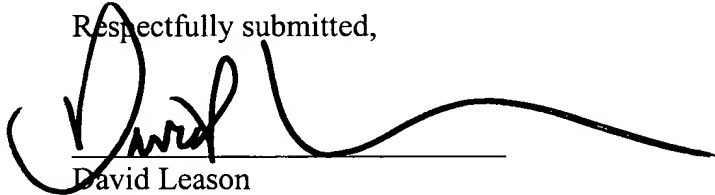
The priority documents

☐ are enclosed

☐ will follow.

Date: August 8, 2000

Respectfully submitted,



David Leason

Reg. No. 36,195

Attorney for Applicant(s)

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PATENT FEE COMPUTATION SHEET

	No. of Claims Presented	Extra Claims Previously Paid For	Number of Extra Claims	Rate
Basic Fee				\$690.00
Total Claims	19 - 20	- 0 = 0	x \$18.00	\$0.00
Independent Claims	3 - 3	- 0 = 0	x \$78.00	\$0.00
Multiple Dependent Claims		- if so, add	\$260.00	\$0.00
Surcharge for late submission of filing fee and/or declaration (\$130.00)				\$0.00
SUBTOTAL				\$690.00
[X] Small Entity REDUCTION (Half of Subtotal)				\$345.00
Fee for recordation of assignment (\$40.00)				\$0.00
Charge for filing non-English language application (\$130.00)				\$0.00
TOTAL				\$345.00